Office of the Sheriff Contra Costa County

APPLICATION FOR LICENSE TO OPERATE CARDROOM

| D. | NEW | REN | EWAL | |
|---|------------------------|----------------------------------|------------------|--|
| Date: | | | | |
| True Name: (Last, First, Midd | le) | | | |
| Business Name: | | | | |
| Local Address: | | Telephone: | | |
| Business Address: | | | | |
| Driver's License No | | | | |
| Sex: (M/F) Height: | Weight: | Hair: | Eyes: | |
| Employer: | I | Employer's Addı | ress: | |
| Employer's Telephone: | | | | |
| Describe Business Requesting | License for: | | | |
| | | | | |
| Person(s) financially interested | d; Section 5203(a): | | | |
| Name: | Address: | | Telephone: | |
| Name: | Address: | | Telephone: | |
| Have you ever been arrested: | (Y/N) If yes, what for | or: | | |
| I certify under the penalties knowledge. I have read ad u | | | | |
| Applicant's signature: | | | | |
| PHOTOGRAPHS | FINGERPRI | INTS 🗆 | CRIM. HIST. RCD. | |
| Additional Information Reque | sted: | | Date: | |
| Application Fee: | No. of Tables: | @ | per table = \$ | |
| Inv. Costs: In | v. Closed by Office | r: | Date: | |
| License Recommendation: | Yes No G | Granted: | Date: | |
| Warren E. Rupf, Sheriff(Department Head) | | Board of Superv (Chairperson) | visors | |

Office of the Sheriff Contra Costa County

APPLICATION FOR CARDROOM EMPLOYEE WORK PERMIT

| Date: | NEW | RE | NEWAL | | |
|---|------------------------------|----------------|----------------------------|-----------|--|
| True Name: (Last, First, Mi | iddle) | | | | |
| | | Telephone: | | | |
| Mailing Address: | | | | | |
| | Social Security No | | | | |
| Date of Birth: | Place of Birth: | | Citizenship: | | |
| Sex: (M/F) Height: | Weight: | Hair: _ | Eyes: | | |
| Employer: | mployer: Employer's Address: | | | | |
| Employer's Telephone: | | | | | |
| Other Employer other than | above establishment: N | ame: | | | |
| Address: | Telephone: | | | | |
| Is this application for a mar | nager's position: (Y N) | | | | |
| Have you ever been convict | ted of a crime? (Y N) D | o you have a | case pending in court no | ow? (Y N) | |
| "I understand that false stat perjury. I certify under pen Applicant's signature: | _ | | on this application are tr | | |
| PHOTOGRAPHS [| FINGERPRIN | ITS 🗆 | CRIM. HIST. RCD. | | |
| Application Fee Pai | d: | New/Renew | al Fee Paid: | | |
| Date Permit Granted: | Date Pe | ermit Denied o | or Revoked: | | |
| Date of Renewal: | | | | | |
| | | | | | |

Permit Number:

Application for Cardroom Employee Work Permit

History Information

| Name: | | Date: | | |
|----------------|---|------------------------------|---------------------------------------|--|
| If you have n | not resided at your present I | ocal address for the past tw | o (2) years, list previous addresses: | |
| Address: | | City: | Dates: | |
| Address: | | City: | Dates: | |
| Address: | | City: | Dates: | |
| | , dates of incidents, locationing in court now. | n and arrest/convictions you | have had. Also indicate all crimina | |
| Date | Crime(s) | Location | Arrest/Conviction | |
| Date | Crime(s) | Location | Arrest/Conviction | |
| Date | Crime(s) | Location | Arrest/Conviction | |
| Have you eve | | than what is listed above? (| Y N) | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| I certify unde | er penalty of perjury that sta | atements made on this appli | cation are true. | |
| Signature of | Annlicant | | Date: | |